SAN FRANCISCO OFFICE 180 Howard Street San Francisco, CA 94105-1639 415.538.2351 www.calbar.ca.gov

The State Bar of California Application for Employment

LOS ANGELES OFFICE 845 S. Figueroa Street Los Angeles, CA 90017-2515 213.765.1100 www.calbar.ca.gov

Date:		osition:	12/8/1		MEI	Office					
PERSONAL INFORI	MATION					•					
Last Name First Na		irst Name	ime			Middle					
			11316 500	100°	(3)						
Address where you com	ho rocol	and (Value must	liat atract address	D.O. Day	do not accente	able \					
Address where you can Street Address	be reacr	nea (You must			ris not accepta	able.)		Ctoto	Zin C	ada	
Street Address			Apt	City				State	Zip C	ode	
Home #	Work #	+	Cell#		E-mail				l		
Tione #	VVOIK #	t	Cell#		L-IIIaii						
To complete our records, indicate all other names you have used while working or attending schools:											
1.0 00											
Do you have relatives or persons you know who are employed or previously employed by the State Bar? Yes No											
If yes, indicate names, relationships and in which offices:											
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Have you previously been employed by the State Bar? Yes No											
Have you previously been employed by the State Bar? Yes No Have you previously worked as a temporary laborer or contractor at the State Bar? Yes No											
	Have you previously been interviewed OR applied for employment with the State Bar? Yes No										
If yes, indicate dates, positions and outcome(s):											
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Are you able to perform the essential functions of the position for which you are applying? Yes No											
If no, please explain:											
Do you have the legal r	ight to wo	ork in the U.S.?	Yes	No							
Have you ever taken the				No A	Also do you ha	ve any int	ent to do so)?	Yes	No	
Have you ever been fire	d, termin	nated, or had ar	n employment		State Bar empl	ovees are	subject to	criminal r	ecord c	learance.	
contract terminated fror					Conviction of a						
performance issues?	Yes	No If yes,	expláin on another			•		. ,			
How did you come to kr	now abou	It this position?	•								
2. JOB-RELATED INFO											
Salary Expectations (Er	nter Nume	erical Value): D	ate you can start e	employme	nt here:	List lang	juages you	are fluen	t with:		
List technical knowledge, computer applications or pc skills you possess:											
List surrether strills shill	liainn Ionn					iai a .a .					
List any other skills, abi	lities, kno	owieage, or acr	nevements you acc	quirea reia	itea to this pos	sition:					
List membership in prof	occional	organizations	or accordations, ha	nore liee	acce and nubli	ootione ve	u concidor	cianificar	at data	of admission to	
the State Bar of Californ											
life State Dai Of Californ	iia (ii app	nicabie), and ai	ily ouler skills of ill	ioiiiialioii	willCirillay De	широпані	iii considei	ing your	quaiiiic	auons.	
California Bar admissio	n date:			Bar Nu	ımher						
3. ACCREDIT EDUCA				Dai No	iiiibci.						
Note: Applicants may be		d to provide pro	oof of diploma, dea	ree trans	crints license	certification	one and re	nietration	<u> </u>		
Note. Applicants may be	e require	a to provide pro	oor or diploma, deg	ice, iians	cripts, licerise,	Certification	oris, and re	gistration	3.		
High School Graduate	or GFD?	Yes	No If yes, name	and locati	on of high sch	ool or GF	D Institute				
g.i concoi aradate (GLD:	. 00	, 500, marile	aria rocati	or mgm oom	OI GE					
							_				
		ites		Major/Minor				ees, Diploma,		Data Orientina	
NAME & ADDRESS		nded	N			ir		License or Certifi		Date Graduated	
	Begin	- End					Re	eceived			
University or Colleges											
Criticistry of Coneges											
Law or Professional											
Academic School(s)											
'											
Other Accredit Study											
How many years of pos	t-second	ary education h	nave you complete	d?							
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			nost recent position. Include job-related volunteer ethe nature of your activities during that time.			
	RESPONSIBILITIES	SUPERVISOR'S NAI	ME AND REASON FOR LEAVING			
Current Employer		CONTACT NUMI	BER			
Address						
City, State, Zip						
Dates employed (from/to)						
May we contact current employer? Yes No						
Position: Provide details on any supervisory role; include da	tes and context:					
Past employer name	ico una comoxi.					
Address						
City, State, Zip						
Dates employed (from/to)						
Position:	too and contact.					
Provide details on any supervisory role; include da Past employer name	ites and context:					
Address						
City, State, Zip						
Dates employed (from/to)						
Position: Provide details on any supervisory role; include da	tes and context:					
Past employer name						
Address						
City, State, Zip						
Dates employed (from/to)						
Position: Provide details on any supervisory role; include da	tes and context:	l	<u> </u>			
Trovide details on any supervisory role, moduce de	ico dia comext.		For additional work history attach another sheet.			
5. Provide three (3) Direct Report Re	ferences. REFERENCES	S WHO SUPERVISED YOU	UR WORK			
Name of reference	Phone		Title of reference and employer's name			
Name of reference	Phone		Title of reference and employer's name			
Name of reference	Phone		Title of reference and employer's name			
All job offers are contingent upon resu	lults of a background cleara	nce from the California Dep	partment of Justice.			
that any false, incomplete or incorr	ect statement may be ca	ause for disqualification fr	e and true to the best of my knowledge. I understant from the hiring process or dismissal. I authorize the employers, educational institutions and professional			
APPLICANT'S SIGNATURE		DATE				